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Attorney Docket No: XENO-007/02US

PATENT

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



### UTILITY PATENT APPLICATION TRANSMITTAL

Transmitted herewith for filing is a U.S. Non-Provisional Utility Patent Application entitled:

#### **ORALLY ADMINISTERED DOSAGE FORMS OF FUSED GABA ANALOG PRODRUGS HAVING REDUCED TOXICITY**

naming as inventor: **Mark A. GALLOP**

and including:

- ☒ (46) pages of description (before the claims);
- ☒ (7) pages of claims ((65) total claims; (3) independent claims);
- ☒ One (1) Sheet of Abstract;
- ☐ (0) sheets of drawing(s) including Figures \_\_\_\_.

1. Also enclosed are:

- ☒ unexecuted Declaration
- ☐ Application Data Sheet
- ☐ Assignment and Assignment Recordation Cover Sheet
- ☐ Power to Prosecute
- ☐ Assertion of Entitlement to Small Entity Status
- ☐ Information Disclosure Statement
- ☐ Preliminary Amendment
- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- ☐ Nucleotide and/or Amino Acid Sequence Submission
  - ☐ Computer Readable Form (CRF) on 3 1/2" floppy disk
  - ☐ Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☐ paper
  - ☐ The content of the copy in computer readable form is identical to the content of the paper, CD-ROM, or CD-R copy of the Sequence Listing.
- ☐ Nonpublication Request and Certification
- ☒ Check No. 20013 in the amount of \$935.00 for the total fee as calculated below

- ☒ Return receipt postcard  
☐ Other:

2. The filing fee has been calculated as follows ☐ and in accordance with the enclosed preliminary amendment:

	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					\$770.00
Total Claims	65	- 20 =	45	x \$18.00	\$810.00
Independent Claims	3	- 3 =	0	x \$86.00	\$0.00
If multiple dependent claims are presented, add \$290.00					\$290.00
Total Application Fee					\$1,870.00
If an Assertion of Entitlement to Small Entity Status is enclosed, subtract 50% of Total Application Fee					\$935.00
Other fees: (specify)					N/A
<b>TOTAL FEE DUE</b>					<b>\$935.00</b>

- ☐ This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.
- ☒ A check for the total fee is attached.
- ☐ Please charge \$\_\_\_ to Deposit Account No. (PA) 03-3117 for the total fee. This paper is being submitted in duplicate.
- ☒ The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. (PA) 03-3117.

3. Please direct all correspondence concerning this application to:

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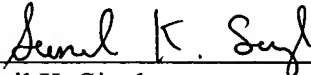
CUSTOMER NUMBER: (PA) **23419**

Dated: December 11, 2003

Respectfully submitted,  
**COOLEY GODWARD LLP**

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By:

  
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